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**CERTIFICATE OF FACSIMILE TRANSMISSION TO THE
UNITED STATES PATENT AND TRADEMARK OFFICE****DATE: October 1, 2003**

Examiner: Bentsu Ro
Art Unit: 2837
Fax: 703-872-9319
From: Thomas M. Fisher

: RE: U.S. Patent Application
: Serial No.: 09/993,783
: Applicant: Gray et al.
: Atty. Dkt. No.: 9D-HR-19209

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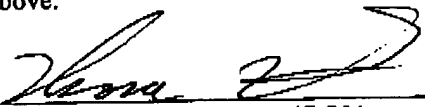
DOCUMENTS SUBMITTED WITH TRANSMISSION:
Amendment Transmittal (3 pgs.)
Amendment in Response to Office Action of July 1, 2003 (32 pgs.)
Fax Transmittal (1 pg.)

Total pages including cover page: 36
If all pages are not received, please contact: Linda Driscoll at Ext. 7229

RE: The above referenced U.S. Patent Application
Title: DC MOTOR SPEED CONTROL SYSTEM
Filed: November 14, 2001

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that these papers are being facsimile transmitted to the U.S. Patent and Trademark Office,
Facsimile Number 703-872-9319 on the date shown above.


Thomas M. Fisher, Reg. No.: 47,564

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VIA FACSIMILE
703-872-9319

9D-HR-19209
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Gray et al.	:	
		:	Group Art Unit: 2837
Serial No.:	09/993,783	:	
		:	Examiner: Bentsu Ro
Filed:	November 14, 2001	:	
		:	
For:	DC MOTOR SPEED CONTROL SYSTEM	:	

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL

OFFICIAL

1. Transmitted herewith is:
Fax Transmittal (1 pg.)
Amendment Transmittal (3 pgs)
Amendment in Response to Office Action dated July 1, 2003 (32 pgs.)

STATUS

2. Applicant
☐ claims small entity status.
☒ is other than a small entity.

VIA FACSIMILE
703-872-9319

9D-HR-19209

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

- (a) ☐ Applicant petitions for an extension of time under 37 C.F.R. 1.136
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension for response within:	Other than small entity Fee	Small entity Fee (if applicable)
<input type="checkbox"/> first month	\$ 110.00	\$ 55.00
<input type="checkbox"/> second month	\$ 410.00	\$ 205.00
<input type="checkbox"/> third month	\$ 930.00	\$ 465.00
<input type="checkbox"/> fourth month	\$1,450.00	\$ 725.00
<input type="checkbox"/> fifth month	\$1,970.00	\$ 985.00

Fec Due \$ _____

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

- ☐ An extension of _____ months has already been secured. The fee paid therefor \$_____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ _____

OR

- (b) ☒ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT	(Col. 2) HIGHEST NO. PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA	SMALL ENTITY ADDITIONAL RATE FEE	OR	OTHER THAN SMALL ENTITY ADDITIONAL RATE FEE
TOTAL	MINUS	=		x \$9 = \$		x \$18 = \$
INDEP.	MINUS	=		x \$42 = \$		x \$84 = \$
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+ \$140 = \$		+ \$280 = \$

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TOTAL ADDITIONAL FEE \$	OR	TOTAL ADDITIONAL FEE \$
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- (a) ☒ No additional fee for Claims is required

OR

- (b) ☐ Total additional fee for claims required \$

FEE PAYMENT

5. Attached is a check in the sum of \$_____
- ☐ Charge Deposit Account No. 01-2384 the sum of.
A duplicate of this transmittal is attached.

FEE DEFICIENCY

6. ☒ If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

AND/OR

- ☒ If any additional fee for claims is required, charge Deposit Account No. 01-2384.
7. ☐ Other:



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